

Instructions for Processing IT Proposal Requests (ITPR)

MCA 2-17-505 states “*It is the policy of the state that ...information technology resources in the state must be conducted in an organized, deliberative, and cost-effective manner.*” **MCA 2-17-506** states “*“Information technology” mean hardware, software, and associated services and infrastructure used to store or transmit information in any form, including voice, video, and electronic data.*” Corrections NSB is required to examine the justification and methodology of each IT proposal and review and approve state agency specifications and procurement methods for the acquisition of information technology resources.

This process does not replace nor supplant Department purchasing procedures or the requirements of the Montana Procurement Act (Title 18, MCA).

This process is paperless whenever possible. **Please note** that although the space appears to be small, the fields expand to meet your needs. **PLEASE be as complete as necessary** to convey the important elements of your request. Do not leave fields blank. Incomplete forms are the primary reason for delays in approval. Complete this form and retain a copy for your records. Email the request as an email attachment in Word (.docx) format along with electronic copies of any relevant documents to the Network Support Bureau (NSB). Send all requests via email addressed to:

[**CORHELP@MT.GOV**](mailto:CORHELP@MT.GOV)

The ITPR may only contain a request for one IT solution. It cannot contain requests for multiple systems from the same vendor.

This ITPR provides both general information as well as your **justification** for this proposal. NSB will establish a request number in **Section 1 (ITPR Number)**. The rest of **Section 1** needs to be filled out by the requestor and is general in nature. **Section 2** provides for a brief *descriptive* name of your request. For the ITPR to be considered, **Sections 3, 4 and 5** must be filled out thoroughly and responses must reflect what is being asked in each section. Failure to fill in the sections completely will result in a delay of being processed. If you are sending additional information please do so electronically. We will do our best to meet your time constraints. If there are time constraints, let us know of any **specific** time constraints such as pending price increases, federal or other deadlines but **do not** simply say ASAP.

Title 18 MCA

Many but not all ITPR's will be regarding some type of procurement of goods or services. Montana law requires a competitive process for most procurements.

Montana Department of Corrections

Information Technology Procurement Request Form

Purpose of Procurement Approval Request

The IT Procurement Request form is designed to ensure that information technology procurements are based upon informed decisions, taking into account the Department's strategic plans for information resources, the nature of support that can be provided for the purchase, and State of Montana Information Technology standards and policies, the Montana Information Technology Act, fiscal impact, and delegated IT procurement authority. **All requests are to be submitted electronically (.docx Word format) via email attachment in their entirety to be considered (no sections are to be left blank).**

Section 1: General

Date: _____ ITPR Number (NSB use only): _____
Division/Bureau: _____ Responsibility Center: _____
Contact Person: _____ Phone: _____
Proposed Vendor or Distributor: _____

Product cost breakdown

Hardware:

Maintenance:

Software:

Services:

Training:

Other:

Annual support costs:

Network connection cost:

Installation costs:

Internal support needed:

Total cost

Please attach vendor's quote if available.

Section 2: Briefly describe the product or service to be procured.

Section 3: Summarize the reason for this procurement, identify the related business issue or need, and how it relates to the Departments goals and objectives.

Section 4: State why the product or service to be procured is the best alternative to address the agency business issue or need.

Section 5: Note the impact on agency project, operations, or services if the requested product or service is not acquired.

Section 6: Other Specifications:

Warranty Period: _____

Warranty Parameters: ☐ On Site ☐ Return to Manufacturer ☐ Parts only ☐ Labor only ☐ Parts and labor

List any special warranty considerations:

Anticipated annual maintenance costs:

List equipment or product specifications and operating system requirements (or attach manufacturer's specification sheet):

Compatibility & Communication Requirements:

Will this product be connected to the network, or installed on a device connected to the network? ☐ Yes ☐ No

Location where this equipment/software will be installed:

List any special requirements:

Installation:

Maintenance:

Section 7: Department Signatures and Approvals:

Bureau Chief/
Superintendent/
Administrator/
Director approval:

(Please type first and last name)

Date

Fiscal approval (if required)

(Please type first and last name)

Date

Contracts approval (if required)

(Please type first and last name)

Date

IBTB REVIEW FOR THIS PURCHASE*for ITB use only*

- ☐ Enterprise Systems
- ☐ IT Infrastructure
- ☐ IT Security/Compliance
- ☐ Department Strategic IT Plan
- ☐ State Strategic IT Plan
- ☐ Support Services
- ☐ State/Department Policy Compliance
- ☐ ITSD Exception Required
- ☐ Current HW/SW sufficient to support

Comments:

SIGNATURES: (required on all)☐ **APPROVED**☐ **DENIED**

Comments:

Signature _____
CIO designee

Date _____

Signature _____
CIO (if required)

Date _____